

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.
 Registrations expire on January 31 unless a renewal is
 submitted between December 1 and January 31.

Instructions

- Print in ink or type.
- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (504) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.

FOR OFFICE USE ONLYPostmark Date: 1-22-99

REG

CS

JAN 22

1990012

P 3:26

\$10.00

OK 10:50

JM

1. NAME Hidalgo Don P. MI
Last First MI2. BUSINESS PHONE 225-927-0160
Area Code and Phone Number3. BUSINESS ADDRESS 4637 Jamestown Ave., Baton Rouge, LA 70808
Street and No. City State Zip4. EMPLOYER Health Associates LLC5. EMPLOYER'S ADDRESS 4637 Jamestown Ave., Baton Rouge, LA 70808
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name Louisiana Managed Healthcare AssociationAddress 4637 Jamestown Ave., Suite F Baton Rouge, LA 70808Business or purpose Trade Association of Managed Care ProvidersDoes this person pay you? Yes

If No, who pays you? _____

2. Name _____

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

HAND DELIVERED


LOBBYING REGISTRATION FORM



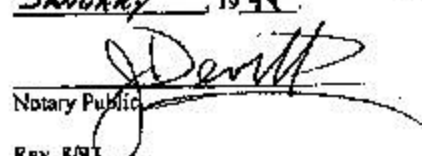
3. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____
4. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____
5. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____

State of LOUISIANAParish of EBR

Before me, the undersigned authority, personally came and appeared DON P. HIDALGO, who, after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.


Signature of Lobbyist

Sworn to and subscribed before me on this 20th day of
JANUARY, 1999.


Notary Public

Rev. 8/97





STATE OF LOUISIANA
DEPARTMENT OF STATE CIVIL SERVICE
LOUISIANA BOARD OF ETHICS
8401 UNITED PLAZA BOULEVARD
SUITE 200
BATON ROUGE, LA 70806-7017
(225) 922-1400
FAX: (225) 922-1414

January 29, 1999

Don P. Hidalgo
4637 Jamestown Avenue
Baton Rouge, La 70808

Dear Lobbyist:

The Louisiana Board of Ethics received your Lobbyist Registration Form. Your Registration was accepted and filed. You have been assigned Lobbyist Registration Number 740 for the year 1999. I have enclosed a receipt for your registration fee.

If you have any questions, please feel free to contact the staff of the Ethics Administration Program.

Very truly yours,

LOUISIANA BOARD OF ETHICS

Kathy Dedon Jr.
Kathy Dedon
Enclosure

1030

DON HIDALGO 7-87
4637 JAMESTOWNE AVENUE (504) 927-0150
BATON ROUGE, LA 70808

B4-481/854

Pay to the
Order of

BOARD OF ETHICS

\$ 10.00

UNION PLANTERS BANK

Union Planters Bank of Louisiana
P.O. Box 2810
Baton Rouge, LA 70821
Member FDIC

For

⑆065404913⑆ 1030 ⑆3003469⑆

LOUISIANA BOARD OF ETHICS

SUITE 200

8401 UNITED PLAZA BLVD.

BATON ROUGE, LA 70809

Receipt

Date 1/22/99

No. 436708

RECEIVED FROM

Don Hidalgo

\$ 10.00

FOR RENT

FOR

1999 lobbying registration

DOLLARS

FROM

ACCOUNT	
PAYMENT	10.00
BALANCE DUE	

☐ cash
☒ check
☐ money order

TO

1030

BY

[Signature]

TC1182